0HS-40 (1/00) AUTHORITY: 23 USC •102 MICHIGAN STATE POLICE COMPLIANCE: Required OFFICE OF HIGHWAY SAFETY PLANNING PENALTY: Delay in receiving reimbursement ☐HIGHWAY SAFETY PROGRAM 4000 COLLINS ROAD, P.O. BOX 30633 LANSING, MI 48909-8133 TRUCK SAFETY PROGRAM TX: (517) 336-6477 AUTHORITY: 1988 PA 348 ☐SECONDARY ROAD PATROL WEB: www.ohsp.state.mi.us COMPLIANCE: Required PENALTY: Delay in receiving reimbursement AUTHORITY: 1978 PA 416 COMPLIANCE: Required PENALTY: Delay in receiving reimbursement GRANTEE (Name & Address) **GRANT NUMBER GRANT PERIOD GRANT AMOUNT** PROJECT NAME REPORT DUE DATE COMPLETED BY I. REPORTED EXPENDITURES SUMMARY IV. RECONCILIATION OF OFFICIAL ACCOUNTING RECORDS **BUDGET CATEGORIES** (a) Account/Fund Number(s): Personnel Costs (C) (f) Contractual Services/Automotive (d) Object Code/ Description Balance Balance Total Operating Costs Line Item # **@** Equipment **@** Indirect Costs Total Reported Expenditures **II. SOURCE OF FUNDS** Federal State County Supplement Other Total III. FEDERAL/STATE FUNDS RECEIVED TO DATE Federal State **Total Recorded Expenditures V. CERTIFICATION** I certify that the above is correct. I certify that the above is correct.
PROJECTOR DIRECTOR FINANCIAL OFFICER TITLE TITLE

SIGNATURE

DATE

SIGNATURE

DATE

## INSTRUCTIONS FOR FINAL EXPENDITURE SUMMARY

## **GENERAL**

This report is required for all grants. One copy of this report is due 45 days following the completion of the grant period. All costs included in this summary must have been incurred during the approved grant period.

- Reported Expenditures Summary: The summary will provide all financial information relating to all activities covering
  the grant period listed on the front. Expenditures reflected in this report should be total grant costs including any
  matching funds.
- II. Source of Funds: Identify state, federal, county or other portion of the total reported expenditures specified in Section 1.
- 111.Federal/State Funds Received to Date: The amount entered in this section will serve as a control between grantee revenue records and reimbursement records of the OHSP.
- IV. Reconciliation of Official Accounting Records: On occasion, grant periods will differ from grantee accounting periods. This section is designed to assist grantees in reconciling grant expenditures that overlap two accounting periods. Total Reported Expenditures and Total Recorded Expenditures should agree. If they do not, an explanation must accompany the Summary.
  - a. ACCOUNT/FUND NUMBER(S): Enter activity number assigned to this grant.
  - b. OBJECT CODE/LINE ITEM NUMBERS: Enter expenditure account code.
  - c. DESCRIPTION: Enter chart of account expenditure description.
  - d. BALANCE: Enter first fiscal year's, year-to-date expenditure totals.
  - e. BALANCE: Enter second fiscal year's, year-to-date expenditure totals.
  - f. TOTAL: Combine the two fiscal year expenditures for total recorded grant expenditures.
- V. Certification: The Final Expenditure Summary must be signed by the Project Director and the Financial Officer.